Commonwealth of Virginia Department of Professional and Occupational Regulation 9960 Mayland Drive, Suite 400 Richmond, Virginia 23233-1485 (804) 367-8509 www.dpor.virginia.gov



Virginia Board for Barbers and Cosmetology LIMITED TERM TATTOOER LICENSE APPLICATION Fee \$105.00

## LICENSE IS EFFECTIVE FOR ONLY FIVE CONSECUTIVE DAYS PRIOR TO THE EXPIRATION DATE.

A check or money order payable to the TREASURER OF VIRGINIA, or a completed <u>credit card insert</u> must be mailed with your application package. APPLICATION FEES ARE NOT REFUNDABLE.

Completed application must include fee and all required documentation. Application is required at least 30 days prior to the first day of the period in which the limited term tattooer license is requested. Failure to answer all questions, or provide

any a	dditional docui	mentation requ	uired will resul	t in a delay of	processing your	application.		
1.	Name			First		Middle		Generation
2.	Provide <u>one</u> of	the following	identification i	numbers.				
	Social Se	ecurity Number	or U	irginia DMV Co	ntrol Number *			
	* State law issued by	requires every app the Commonwealth	licant for a license h to provide a socia	, certificate, registr Il security number o	ation or other authoriza or a control number issu	ation to engage in a but the Virginia Department	usiness, trade, prof artment of Motor Ve	ession or occupation hicles.
3.	Date of Birth	MM/DD/	YYYY					
4.	Maiden Name	or Former Sur	name(s)					
5.	Mailing Addres	ss (PO Box acc	cepted)					
		ess is submitted, be printed on the	llaamaa	City			State	Zip Code
6.	Street Address (PO Box <u>not</u> accepted)  PHYSICAL ADDRESS REQUIRED			Check here if Street Address is the <u>same</u> as the Mailing Address listed above.				
			-	City			State	Zip Code
7.	Email Address							
8.	Contact Numb	ers	Primary Teleph	none .	Alternate To	elephone	F	ax
9.	Scheduled dat	es of operation	n in Virginia	From:	MM/DD/YYYY	•	MM/DD/YYYY	
	Where in the establishment				e limited term ta			
		_						
Office Use Only	DATE	FEE	TRANS CODE 1020	ENTITY#	1233	FILE #/LICENSE #		ISSUE DATE

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11.	Permanent Cosmetic Tattooer License?  No     Output							
	Yes	If yes, provide your license number ar	nd expiration date below.					
		VA License Number	Expiration Date	e				
12.	Are you <u>currently</u> licensed to practice tattooing in any other state or jurisdiction of the United States?  No  Yes  If yes, attach an original <i>Certification of Licensure</i> (dated within the last 60 days) prepared by the state board or licensing body in which you are currently licensed.							
13.	Do you hold an <a href="mailto:exemple;">expired</a> tattooing license, certification, or registration in any state or jurisdiction within the United States or its territories (excluding Virginia)?  No  Yes  If yes, complete the following table.							
	_	State/Jurisdiction	License, Certification or Registration Number	Expiration Date				
14. 15.	No	If yes, when?  MM/DD/YYYY		rilization and acontic				
10.	Have you completed health education including, but not limited to blood borne disease, sterilization and aseptic techniques related to tattooing, and first aid and CPR that is acceptable to the board?  No IF NO, YOU ARE NOT ELIGIBLE FOR LICENSURE  Yes If yes, attach documentation of successful completion of the required health education and training.							
16.	Have you ever been subject to a disciplinary action taken by <u>any</u> (including Virginia) local, state or national regulatory body?  No							
	Yes If yes, provide a certified copy of the final order, decree or case decision by a court or regulatory agency with lawful authority to issue such order, decree or case decision.							
17.	Have you ever had an application for licensure, certification or registration as a practitioner or instructor in the fields of barbering, cosmetology, waxing, nail care, esthetics, body-piercing, or tattooing <u>denied</u> by any (including Virginia) local, state or national regulatory body?							
	No  Yes							

18.	Have you ever been convicted in any jurisdiction of a <i>misdemeanor and/or felony</i> ? Any guilty plea or plea of note contendere must be disclosed on this application. Do not disclose violations that were adjudicated as a minor in the juvenile court system.  No							
	Yes		If yes, applicants are <u>required</u> to attach an <u>original criminal happolice</u> . Applicants with convictions from other jurisdictions, oth official criminal history record from each state in which they request complete criminal records from the Virginia State Poli at 804-674-6718.	her t	than Virginia; must provide an origina ve convictions. Virginia residents may			
X	agenc consid	y with lered	nviction, please provide a certified copy of the final order, decreed lawful authority to issue such order, decree, or case decision; a with this application (e.g., information on the status of incarceration of rehabilitation etc.).	and a	any other information you wish to have			
19.	I, the undersigned, certify that the foregoing statements and answers are true, and I have not suppressed an information that might affect the decision to approve this application. I certify that I will notify the Department if I a subject to any disciplinary action or convicted of a felony or misdemeanor (in any jurisdiction) prior to receiving the requested license. I certify that I have read, understood and complied with all the laws of Virginia under the provision of Title 54.1, Chapter 7 of the Code of Virginia and the Virginia Board for Barbers and Cosmetology Tattoois Regulations.							
	Signatu	ıre _			Date			
20.		•	fessional passport compliant 2" x 2" color photo taken within It must meet the following requirements:	the	last 6 months to reflect your curren			
	$\Rightarrow$	sized so that your head is approximately 1 inch from the bottom of the chin to the top of the head						
	$\Rightarrow$	taken in front of a plain white background						
	$\Rightarrow$	be a full-face view, directly facing the camera with a neutral facial expression						
					Attach Photo Here. Photocopy pictures are not permitted.			